

2008

W I C

FOR A HEALTHIER AMERICA

WIC

ACHIEVES THE GOALS OF GOOD HEALTH
AND NUTRITION FOR FAMILIES

The Special Supplemental Nutrition Program for Women, Infants and Children (WIC) is a short-term intervention program designed to influence lifetime nutrition and health behaviors in a targeted, high-risk population.

WIC provides:

- Quality nutrition education and services.
- Breastfeeding promotion and education.
- A monthly food prescription (package).
- Access to maternal, prenatal and pediatric health-care services.

WIC served:

- 8.28 million participants each month through 10,000 clinics nationwide in 2007.

- 904,000 pregnant women
- 551,000 breastfeeding women
- 638,000 postpartum women
- 2.2 million infants
- 4 million children

WIC requires:

- Income level has to be less than or equal to 185% of the poverty level.
- At least one nutrition risk has to be documented.

SAVINGS DUE TO
BY PREGNANT WOMEN

WIC

PARTICIPATION

Approximately one out of four pregnant women in the United States are in WIC. Almost 51% of pregnant women enroll in WIC during their first trimester of pregnancy. At certification, 27% of pregnant women have three or more nutrition risk factors.

Numerous studies have shown that pregnant women who participate in WIC have longer pregnancies leading to fewer premature births; have fewer low and very low birth-weight babies; experience fewer fetal and infant deaths; seek prenatal care earlier in pregnancy and consume more of such key nutrients as iron, protein, calcium, and Vitamins A and C.

Cost of Low and Very Low Birth-Weight Babies

- Preterm births cost U.S. over \$26 billion a year.
- The average first year medical costs for premature/low birth-weight baby is \$77,000 compared to \$1,700 for a baby without complications.
- For very low birth-weight babies, a shift of 1 pound at birth saves approximately \$28,000 in first year medical costs.
- Medicaid costs are reduced on average between \$12,000 and \$15,000 for every very low birth-weight incident prevented.

Prenatal Care Saves Money

- It costs approximately \$732 a year for a pregnant woman to participate in WIC.
- WIC prenatal care benefits reduce the rate of low birth-weight babies by 25% and very low birth-weight babies by 44%.
- Prenatal WIC participation is associated with an increase of 6.6 oz for low birth-weight babies.
- Every dollar spent on pregnant women in WIC produces \$1.92 to \$4.21 in Medicaid savings for newborns and their mothers.

WIC

SAVES DOLLARS

In 2007, \$1.9 billion in nontax revenues have been generated through competitive bidding of infant formula and other cost containment initiatives to serve approximately 2.2 million participants.

WIC

BREASTFEEDING

Breastfeeding helps mothers feel close to their baby, and the breast milk contains all the nutrients infants need to grow and develop. Breastfed infants tend to be healthier since they receive antibodies from the breast milk, which protects them against infection. It has been estimated that a minimum of \$3.6 billion would be saved if current US exclusive breastfeeding rates increased to at least 50% at 6 months.

- In 2006, survey data indicated that 58% of WIC infants ages 6-13 months were breastfed.
- In Colorado, exclusively breastfeeding a WIC infant saved \$160 in the first six months of life from lower WIC and Medicaid costs.

EFFECTS OF

WIC

PARTICIPATION ON INFANTS
AND CHILDREN

WIC helps to ensure infants' and children's normal growth, reduces levels of anemia, increases immunization rates, improves access to regular health care/social services and improves diets. Children are eligible for WIC up until they reach their fifth birthday. In 2006, 53% of all infants born in the United States were in WIC.

Health, Weight, Anemia, Cognition and Dietary Intake

Research has demonstrated that:

- WIC infants are in better health than eligible infants not participating in WIC.
- WIC children at ages 1 to 2 have less dental related Medicaid costs compared to children who do not participate in WIC.
- Children who drop out of WIC are less likely to be immunized compared to children who participate in WIC.
- WIC helps to prevent underweight among at least 75,000 infants nationwide.
- Infants receiving WIC are less likely to be underweight, but are not at greater risk for overweight.
- Study indicated that there is no scientific evidence that participation in the WIC program contributes to overweight and obesity.
- Low-income children not enrolled in the WIC Program have a higher prevalence of anemia than those who are enrolled.
- Four and five-year-olds whose mothers participated in WIC during pregnancy have better vocabulary test scores than children whose mothers had not received WIC benefits.
- WIC benefits positively influence the nutrient intakes of children.
- Participation in WIC dramatically improve Healthy Eating Index scores for the household.
- Participation in WIC reduces the risk of child abuse or neglect.
- WIC participation is associated with increased use of preventive care and improved health status of children.

DEAR FRIEND OF WIC

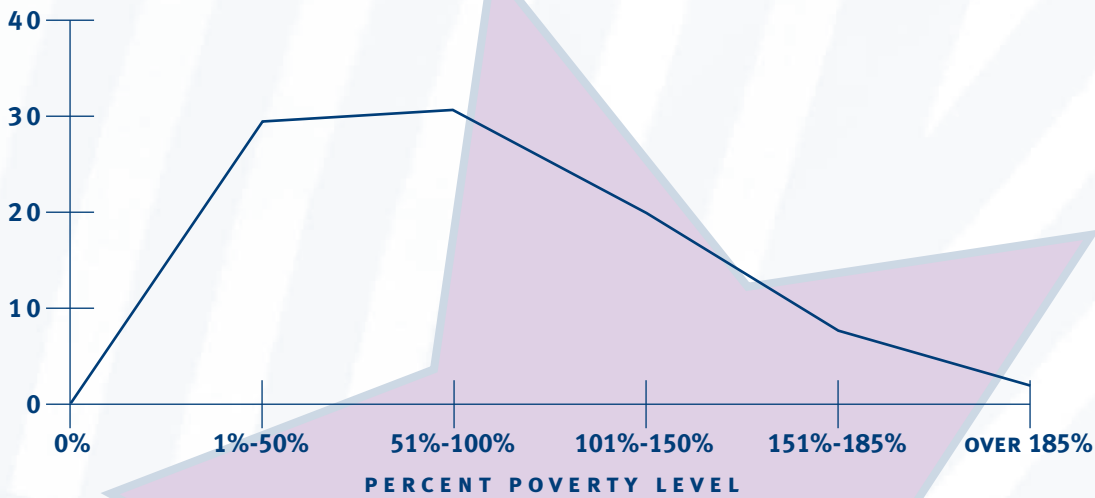
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We hope that this information will help you understand the critical role WIC plays in building a better future for America’s children. As the nation’s premier public health nutrition program, WIC provides the competitive edge that will give our nation’s future leaders a fair start in life. *Thank you for your support.*

For further information about the WIC Program, contact your local WIC agency or the NATIONAL WIC ASSOCIATION at 202/232-5492 or visit www.nwica.org.

UNITED STATES: INCOME OF WIC PARTICIPANTS

PERCENT OF WIC PARTICIPANTS



Graph is based on PC2006 data.

Department of Health and Human Services 2007 Poverty Guidelines for a family of four. (Average WIC family size was four in 2006.)

% Poverty Level	=	Income Level
0%	=	\$0
1-50%	=	\$206-10,325
51-100%	=	\$10,531-20,650
101-150%	=	\$20,856-30,975
151-185%	=	\$31,815-38,202

Source: USDA. Numbers may not equal 100% due to incomplete data.

WIC

PARTICIPANTS’ FACTS

- Income (see chart above)**
- To be eligible for WIC, participants’ income level must be at or below 185% of the poverty level or on Medicaid.
 - 60% of WIC participants reside in families with income below the poverty level.

- According to 2006 data:**
- The average number of persons in a WIC family was four.
 - The average income of a participant was \$15,577.
 - 30% of participants did not participate in any other federal assistance programs.

- Age Distribution**
- In 2006:**
- 85% of the pregnant, breastfeeding and 86% of the postpartum women participants were between the ages of 18 and 34 years.
 - 6% of women participants were under age 17.

- Racial and Ethnic Distribution**
- In 2006, 32% of all WIC participants were white, 41% were hispanic, 20% were black, 3% were Asian or pacific islanders and 2% were American Indian or Alaskan natives.

WIC

FOOD PRESCRIPTION

- WIC provides a monthly prescription of nutritious foods tailored to supplement the dietary needs of participants to ensure good health, growth and development. The foods are specifically chosen to provide consistency with the Dietary Guidelines for Americans and established dietary

recommendations for infants and children under 2 years of age. The selected foods also reinforce WIC nutrition education messages, address emerging public health nutrition-related issues, and provide wide appeal to the diverse WIC population.

WIC FOODS	ALLOWABLE ALTERNATIVES	KEY NUTRIENTS PROVIDED
FRUITS AND VEGETABLES	Fresh, Frozen, Canned and Dried	Vitamins A, C and E, Folate, Potassium, Fiber
COMMERCIALLY PREPARED BABY FRUITS/VEGETABLES AND MEAT		Vitamins A, C and E, Folate, Potassium, Fiber, (Iron and Zinc in baby meat)
MILK	Soy beverage and Tofu	Protein, Calcium, Vitamins A and D, Folate, Riboflavin
WHOLE GRAIN CEREALS		Iron, B Vitamins, Folate, Fiber, Zinc
WHOLE WHEAT BREAD	Brown rice, Oatmeal, Whole grain barley, Bulgur, Soft corn or Whole wheat tortillas	Iron, B Vitamins, Magnesium, Zinc, Fiber
LIGHT TUNA	Salmon, Sardines, Mackerel	Protein, Folate
CANNED AND DRY BEANS/PEANUT BUTTER		Protein, B Vitamins, Folate, Fiber
CHEESE		Protein, Calcium, Vitamins A and D, Riboflavin
JUICE		Vitamin C, Folate
EGGS		Protein, Vitamins A and D
IRON-FORTIFIED INFANT FORMULA	Best alternate source of essential nutrients for non-breastfeeding infants	Iron